

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) TEI-0135	
Application Number 10/551,668-Conf. #5514		Filed September 30, 2005	

For EXAMINATION APPARATUS FOR SLEEP RESPIRATORY DISTURBANCE AND THERAPEUTIC SYSTEM	
Art Unit 3735	Examiner C. Y. JANG

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. - **ONE MONTH PETITION FOR EXTENSION FILED AND FEES PAID ON JANUARY 6, 2009.**


The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175

- ☐ Applicant claims small entity status. See 37 CFR 1.27.
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-0013.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

- I am the
- ☐ applicant/inventor.
 - ☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 - ☒ attorney or agent of record. Registration Number 56,029
 - ☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____

 _____ Signature	_____ January 30, 2009 Date
_____ Maulin M. Patel Typed or printed name	_____ (202) 955-3750 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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01-FC:1001 010.00 DA
02-FC:1232 360.00 DA